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May 11, 2006

from **WILLIAM A. JIVIDEN**Direct: 937-449-6448 / Fax: 937-223-0724 / william.jviden@dinslaw.com**To:** Examiner Lois L. Zheng**Firm:** MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS**Fax Number:** 571/273-8300**Client Number:** UVD 0299 IA/40815.399**Pages:** 60
(including cover)**Comments:** OFFICIAL OFFICIAL OFFICIAL

Applicant(s) : Phelps, et al.
Serial No. : 10/625,886
Filed : July 23, 2003
Title : NON-TOXIC CORROSION-PROTECTION
RINSES AND SEALS BASED ON RARE EARTH ELEMENTS
Docket No. : UVD 0299 IA / UD 268
Examiner : L. Zheng
Art Unit : 1742

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MAY 11 2006

PTO/SB/17 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 260.00

Complete if Known

Application Number	10/625,886
Filing Date	July 23, 2003
First Named Inventor	Andrew W. Phelps
Examiner Name	Lois L. Zheng
Art Unit	1742
Attorney Docket No.	UVD 0299 IA/UD 268

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

_____ - 20 or HP = _____ x _____ = _____ **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ - 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Terminal Disclaimers (2)

Fees Paid (\$)

260.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 42,695	Telephone (937) 449-6400
Name (Print/Type)	William A. Jorden	Date 05/11/2006	

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<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
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